APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE

Title:: CONTROL OF RESPIRATORY

OXYGEN DELIVERY

Attorney Docket Number:: 225.00010124

Suggested Drawing Figure:: 1
Total Drawing Sheets:: 5
Small Entity?:: YES

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: Matthew

Middle Name:: F.

Family Name:: Schmidt
City of Residence:: Lino Lakes
State or Province of Residence:: Minnesota

Country of Residence:: United States of America Street of Mailing Address:: 738 Country Lakes Drive

City of Mailing Address:: Lino Lakes
State or Province of Mailing Address:: Minnesota

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 55014

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: John Middle Name:: S. Family Name:: Buan

City of Residence:: Maple Grove State or Province of Residence:: Minnesota

Country of Residence:: United States of America

Street of Mailing Address:: 15412 64th Place North

City of Mailing Address:: Maple Grove State or Province of Mailing Address:: Minnesota

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 55311

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: Catherine

Middle Name:: A.

Family Name::

City of Residence::

State or Province of Residence::

Minnesota

State or Province of Residence:: Minnesota

Country of Residence:: United States of America

Street of Mailing Address:: 1875 Selby Avenue

City of Mailing Address:: St. Paul
State or Province of Mailing Address:: Minnesota

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 55104

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 26813

REPRESENTATIVE INFORMATION

Representative Customer Number:: 26813

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/370,799	02/20/03
10/370,799	Continuation of	10/076,001	02/14/02
10/076,001	Continuation of	09/463,614	01/25/00
09/463,614	National Stage of	PCT/US98/15490	07/24/98
PCT/US98/15490	Continuation-in-Part	08/900,686	07/25/97
PCT/US98/15490	Non-Provisional of	60/064,578	11/04/97

ASSIGNMENT INFORMATION

Assignee Name:: Minnesota Innovative Technologies and

Instruments

Street of Mailing Address:: 738 Country Lakes Drive

City of Mailing Address:: Lino Lakes State or Province of Mailing Address:: Minnesota

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 55014